

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

UGI CORPORATION POLITICAL ACTION COMMITTEE(UGI/PAC)

ADDRESS (number and street)

PO BOX

☐ (Check if address is changed)

Reading

CITY ▲

PA

STATE ▲

19612

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address is changed)

sbreidenstein@ugi.com

Optional Second E-Mail Address

tschad@ugi.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

MM / DD / YYYY  
10 / 09 / 2015

3. FEC IDENTIFICATION NUMBER ►

C C00139667

4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Timothy Schad

Signature of Treasurer Timothy Schad

[Electronically Filed]








Date

MM / DD / YYYY  
10 / 23 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

1.  FEC ID number **C** 
2.  FEC ID number **C** 
3.  FEC ID number **C** 
4.  FEC ID number **C** 

Write or Type Committee Name

**UGI CORPORATION POLITICAL ACTION COMMITTEE(UGI/PAC)****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

UGI CORPORATION

Mailing Address

460 NORTH GULPH ROAD

KING OF PRUSSIA

PA

19406

CITY

STATE

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Joseph Swope

Mailing Address

2525 N 12th St Suite 360

P.O. Box 12677

Reading

PA

19612-2677

Title or Position

CITY

STATE

ZIP CODE

Secretary

Telephone number

610

796

3483

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name  
of Treasurer

Timothy Schad

Mailing Address

2525 N 12th St Suite 360

P.O. Box 12677

Reading

PA

19612-2677

Title or Position  
Treasurer

CITY

STATE

ZIP CODE

Telephone number

610

796

3483

Full Name of  
Designated  
Agent

Shaun Breidenstein

Mailing Address

2525 N 12th St Suite 360

P.O. Box 12677

Reading

CITY

PA

STATE

19612-2677

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

610

796

3626

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells Fargo

Mailing Address

1940 North 13th Street

Reading

CITY

PA

STATE

19604

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE